KHPA 2008/9 Highlights

Effective Purchasing and Administration of Health Care:

- **Developed the Medical Home Model of Delivery:** KHPA convened a stakeholder group to begin implementing the medical home model that was enacted by the legis-lature in 2008.
- Increased Payments for Hospitals that Treat Low-Income Patients: With the reforms, the DSH program will provide at least an additional \$4.3 million in federal matching funds annually.
- Improved hospital payment methodology. Implemented Medicare payment methodology that targets payments to more severe cases and limits payment for hospital-acquired conditions.
- Increased payments to university-based physicians and graduate medical education. Successfully implemented policies to increase Medicaid payments to University of Kansas physicians for outpatient care in Kansas City and Wichita, and developed options adopted by the Legislature to increase payments to the Wichita Center for graduate medical education.
- Increased Efficiencies by Using Standard Medical Identification Cards: In September 2008 KHPA discontinued the production and mailing of monthly paper Medicaid medical ID cards and became the first state in the country to implement a permanent card using recently developed national standards endorsed by the Workgroup for Electronic Data Interchange (WEDI).
- Increased Efficiencies through Document Imaging: KHPA acquired a document imaging system and began using this technology agency-wide to manage documents, making them more portable and accessible to all users.
- Implemented a Health Information Exchange Pilot Program: The CareEntrust program was implemented in May 2008 for state employees who live in the 15 counties of the Kansas City metropolitan area.
- Chosen to Participate in the State Quality Improvement Institute: Kansas, together with eight other states, was chosen to participate in the State Quality Improvement Institute an intensive, competitive selection effort to provide states with high-level technical assistance to develop and implement action plans to improve performance across targeted quality indicators.
- Expanded web-based services for beneficiaries. Launched a beneficiary web portal for Medicaid recipients that allows access to eligibility and managed care enrollment information.
- Maximized value of Federal stimulus dollars for Kansas. Provided significant policy input that helped inform Congressional debate and improve Medicaid-based supplemental funding for the state of Kansas.

Health Promotion Oriented Public Health Strategies:

- Honored by the Institute for Health and Productivity Management: KHPA was named a winner of the 2008 *Value-Based Health (VBH) Award* by the Institute of Heath and Productivity Management.
- Launched Online Health Consumer Search Tool: The Kansas Health Online Consumer Transparency Portal (www.kansashealthonline.org) was launched in January.
- **Provided Wellness Programs for State Employees:** More than 76,000 employees and dependents are now eligible to participate in the wellness programs. Approximately 16,300 members took a personal health assessment and more than 9,000 individuals participated in health screening events held across the state.

Data Driven Health Policy:

- Completed the 2008 Medicaid Transformation Process to Reform Kansas Medicaid: KHPA completed 14 program reviews of the Kansas Medicaid program and has scheduled additional reviews for 2009. Total state savings from Transformation program will exceed \$10 million annually.
- **Finalized and Published Health Indicators:** The KHPA Board adopted a list of nearly 90 different measures which had been recommended by the Data Consortium, divided into four categories that are aligned with the KHPA Board's vision principles: Access to Care; Health and Wellness; Quality and Efficiency; and Affordability and Sustainability.
- Completed Plans and Began Implementation of Data Analysis Infrastructure: KHPA completed the Request for Proposals process and awarded the Data Analytic Interface (DAI) contract to Thomson Reuters to consolidate and manage health care data for several state programs managed by KHPA, including the Medicaid Management Information System, the State Employee Health Benefit Program, and the Kansas Health Insurance Information System.

KHPA 2007 Highlights

Strengthening Medicaid/HealthWave

- Implemented HealthWave Contracts: KHPA awarded two new Medicaid Managed Care Organizations (MCO) to serve our HealthWave populations which resulted in increased consumer health plan choice, with an estimated State savings of between \$10 and 15 million dollars annually.
- Resolved Center for Medicare and Medicaid Services (CMS) Audits and Deferrals. KHPA resolved all outstanding Medicaid audit and deferral issues in the Local Educational Agencies (LEA), Targeted Case Management (TCM), and Child Welfare and Mental Health programs; KHPA is working closely with partner agencies to ensure Medicaid program integrity moving forward.
- Managed New Citizenship Requirements: KHPA managed and resolved the impact of new federal Medicaid Citizenship/Identification requirements, requesting and acquiring funds to increase Clearinghouse staff to reduce the number of unprocessed applications and reviews.
- Reformed Payments for Hospitals: Working closely with the Kansas Hospital Association, hospital stakeholders, and consultants, KHPA developed a new Disproportionate Share Hospital (DSH) payment formula to maximize federal contributions to the program, treat both in-patient and outpatient care equitably, and strengthen Critical Access Hospitals (CAH).
- **Increased Dental Providers**: KHPA increased the number of dental providers serving Medicaid patients and increased the number of Medicaid consumers receiving dental services
- Created Program for Working Disabled Kansans: KHPA established the Work Opportunities Reward Kansans (WORK) program which provides cash and counseling supports for working disabled Kansans.
- Negotiated Additional Federal Dollars for Data Initiative: KHPA negotiated an enhanced match for Data Analytic Interface (DAI) from CMS a project to improve access to information for improved health plan management and data driven policymaking.
- Completed National Provider Identification (NPI): KHPA implemented the federal NPI program. The NPI is intended to uniquely identify a health care provider in standard transactions, such as health care claims.\
- Strengthened Pilot Program for the Chronically III: KHPA implemented the Enhanced Care Management Pilot Project in Sedgwick County, a community based disease management program; the pilot is currently being evaluated with future utilization dependent upon the outcome of that evaluation.
- With competitive grant dollars, implemented innovated preventive care program for chronically ill aged and disabled. The "Health Promotion for Kansans with Disabilities" pilot project, funded through the CMS Transformation Grant program, is to identify and improve primary care needs among the chronically ill.
- Strengthened Pilot Program for Health Information Technology: KHPA piloted a shared community health record with Kansas Medicaid providers in Sedgwick County; an evaluation has been conducted to evaluate the impact of the CHR on quality of care.

- An additional community health record pilot in Kansas City for State Employees will begin in 2008.
- Coordinated Data Systems: KHPA linked the state immunization registry with the Medicaid Management Information System (MMIS) to allow for the transfer of immunization data for all eligible Medicaid beneficiaries.

State Employee Health Plan

- Improved Health and Wellness Offerings: The State Employee Health Benefits Program (SEHBP) developed a program to increase the promotion of health and wellness in the health benefits plan of state employees, to include access to health coaching, personal health screenings, and health education and promotion tools.
- Provided Employees with Additional Tools and Marketing Information: A Benefit Selector/Plan Selector Tool was made available to SEHBP eligible persons and improved marketing materials were developed.
- **Increased Support for Dependent Coverage**: The employer financial contribution for SEHBP dependent coverage was increased from 45% to 55%, making health insurance more affordable for families.
- **Improved Health Plan Benefit Design**: The SEHBP benefit design was improved to expand the focus on prevention, health and wellness with emphasis placed on tobacco cessation, obesity, and diabetes management.
- **Strengthened Financial Management**: A systematic financial reporting SEHBP mechanism to the Health Care Commission (HCC) was initiated.

Agency Infrastructure

- Completed Agency Staffing: KHPA received legislative approval and hired an additional 31 staff positions, primarily in the areas of finance, accounting, and oversight to support the mission of the independent agency.
- **Integrated Functions Across Agency**: KHPA integrated programs across the agency to consolidate finance, contracts, legal, operations.
- Secured Additional Space for our Employees: KHPA secured additional office space, outfitted it, and moved staff to the Mills Building and an expanded 10th Floor of LSOB.
- Improved Agency Communication: The KHPA Intranet was established for internal communications, allowing a mechanism for the posting important documents and files that need to be accessed by all KHPA staff.
- Improved Agency Operations: KHPA instituted several important infrastructural initiatives which improved system efficiency and effectiveness, including the establishment of policies, procedures, and budgetary practices.

Interagency Partnerships

• **Developed Long Term Care Program**: The Long-Term Care Partnership program was jointly developed and implemented by the Kansas Insurance Department, Kansas Department on Aging and the Kansas Health Policy Authority, providing a means for

- individuals who have long term care partnership policies to retain more assets, based on policy benefits received, than other persons applying for Medicaid.
- Solidified Interagency Operations: Interagency relationships were codified by new updated interagency agreements, addressing responsibilities, duties and management of Medicaid programs that are implemented by the Kansas Department of Social and Rehabilitative Services (SRS), the Kansas Department on Aging (KDOA) and the Kansas Juvenile Justice Authority (JJA) and are coordinated by the Kansas Health Policy Authority (KHPA).
- Implemented CMS-required reforms: State Plan Amendments were submitted and approved by CMS to make needed changes in the Targeted Case Management and Local Educations Agencies Medicaid programs. Supported Other Agency Reform Efforts: KHPA supported the implementation of Prepaid Inpatient Health Plan (PIHP) and Prepaid Ambulatory Health Plan (PAHP), waiver for dental coverage, and autism waiver Medicaid initiatives advanced by SRS and KDOA.

Health Reform

- **Developed Reform Recommendations**: KHPA in conjunction with the Health for All Kansas Steering Committee developed health reform recommendations aimed at increasing personal responsibility for health, paying for prevention and promoting medical homes, and improving access to affordable health insurance.
- **Solicited Significant Stakeholder Input**: KHPA convened four Advisory Councils; Provider Council, Purchaser Council, Consumer Council, and the At-Large Council which met from March through December to provide input into the development of the health reform recommendations presented to the Legislature and the Governor.
- **Met with Kansans Across the State**: KHPA convened a well attended Listening Tour in 22 communities across the state to dialog about health reform in Kansas.
- **Obtained External Funding from Kansas Foundations**: Foundation funding to support the health reform stakeholder participation and data analysis process was secured.

New Initiatives

- Created Consumer Health Information Website Kansas Health Online: Health information transparency for consumers was enhanced through the establishment of a two-phase initiative that (1) collects and makes available health and health care data resources to consumers and (2) will publicize cost and health care quality information developed by the Health Data Consortium for use by purchasers and consumers.
- Improved Agency Health Policy and Research Capacity: KHPA added significant health policy research and analysis staff capacity and undertook the development of a data management, and policy analysis program that will promote data driven health policy decisions, improve health care efficiency, lower health care costs, and improve overall health status.
- Convened Data Stakeholders: KHPA convened the first meeting of the Data Consortium to provide stakeholder input on data policy and assess State's health status.
- **Developed Private Insurance Model for Low Income Kansans**: KHPA engaged a public workgroup to successfully develope and design of the Premium Assistance

- program, Kansas Healthy Choices, which was authorized by the Kansas Legislature to provide private health insurance for low-income parents living below the poverty line.
- Established Inspector General's Office: Legislation was passed authorizing the establishment of the Office of the Inspector General at the KHPA to provide an independent oversight body to review and investigate the performance of the KHPA's delivery of health services (KHPA Office of the Inspector General 2008 Annual Report can be found at http://www.khpa.ks.gov).

KHPA 2006 Highlights

- Established new reporting mechanism and financial accountability. Implemented monthly public reporting of budget performance and financial status, including key administrative and programmatic details.
- Increased communication with stakeholders, employees and the general public.

 Communication and transparency are important parts of the process of advancing health policy in the state. Developed a new website, which is updated daily, www.khpa.ks.gov. Created staff e-newsletter which is distributed weekly to staff members and established quarterly all-staff town hall meetings. Conducted five town hall meetings across the state for stakeholders.
- Successfully completed HealthWave contracting process. Signed contracts for Medicaid managed care services with two contractors, saving the state between \$10 to \$15 million annually and introducing choice and competition into this important and growing market.
- Implemented new Presumptive Medical Disability (PMD) process. This process brings full benefits and Federal cost-sharing to qualified disability applicants.
- **Presumptive Eligibility for Medicaid**. Added Via-Christi Regional Medical Center and GraceMed Health Clinic in Wichita to an ongoing pilot project to increase outreach and participation in Medicaid.